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CONFIRMATION NO. 3349

<b>SERIAL NUMBER</b> 10/501,004	<b>FILING OR 371(c) DATE</b> 12/13/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3775	<b>ATTORNEY DOCKET NO.</b> 27214-21
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP03/00035 01/03/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

GERMANY 102 00 690.3 01/10/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> AUSTRIA	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

99351

**TITLE**

ACCESSORY FOR IMPLANTING A HIP ENDOPROSTHESIS, AND METHOD FOR MANIPULATING THE SAME

<b>FILING FEE RECEIVED</b> 1566	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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